



# Notification of Hazardous Waste Activity

Please refer to the *Instructions for Filing Notification* before completing this form. The information requested here is required by law (*Section 3010 of the Resource Conservation and Recovery Act*).

**For Official Use Only**

## Comments

C						1986 JUL 24 PM 12:25
C						

Installation's EPA ID Number

**Approved**

Date Received  
(yr. mo. day)

[illegible]

8	6	0	7	2	2
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### I. Name of Installation

P	A	U	L	U	S		A	G	E	N	C	Y
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II. Installation Mailing Address

Street or P.O. Box

C	6	6	3					G	E	O	R	G	E	A	V	E
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City or Town															State		ZIP Code		
NORTH BRUNSWICK															N.J.		08902		

### III. Location of Installation

Street or Route Number

C	1	8	7		N	E	W		S	T	R	E	E	T
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#### IV. Installation Contact

Name and Title (last, first, and job title)

Phone Number (area code and number)

C	P	A	V	L	V	S	R	O	B	E	R	T								201	5	4	5	2	4	0	0
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## V. Ownership

**A. Name of Installation's Legal Owner**

B. Type of Ownership (enter code)

C	P	A	U	L	U	S	R	G	E	I	G	E	R	A						PARTNERSHIP
B																				

VI. Type of Regulated Waste Activity (Mark 'X' in the appropriate boxes. Refer to instructions.)

### A. Hazardous Waste Activity

### B. Used Oil Fuel Activities

- ☒ 1a. Generator ☐ 1b. Less than 1,000 kg/mo.
- ☐ 2. Transporter
- ☐ 3. Treater/Storer/Disposer
- ☐ 4. Underground Injection
- ☐ 5. Market or Burn Hazardous Waste Fuel  
(enter 'X' and mark appropriate boxes below)
- ☐ a. Generator Marketing to Burner
- ☐ b. Other Marketer
- ☐ c. Burner

- ☐ 6. Off-Specification Used Oil Fuel  
(enter "X" and mark appropriate boxes below)
- ☐ a. Generator Marketing to Burner
- ☐ b. Other Marketer
- ☐ c. Burner
- ☐ 7. Specification Used Oil Fuel Marketer (or On site Burner)  
Who First Claims the Oil Meets the Specification

**VII. Waste Fuel Burning: Type of Combustion Device** (enter "X" in all appropriate boxes to indicate type of combustion device(s) in which hazardous waste fuel or off-specification used oil fuel is burned. See instructions for definitions of combustion devices.)

☐ A. Utility Boiler      ☐ B. Industrial Boiler      ☐ C. Industrial Furnace

VIII. Mode of Transportation (transporters only — enter 'X' in the appropriate box(es))

☐ A Air    ☐ B Rail    ☒ C Highway    ☐ D Water    ☐ E Other (specify)

IX. First or Subsequent Notification

Mark 'X' in the appropriate box to indicate whether this is your installation's first notification of hazardous waste activity or a subsequent notification. If this is not your first notification, enter your installation's EPA ID Number in the space provided below.

C. Installation's EPA ID Number

☒ A. First Notification      ☐ B. Subsequent Notification (complete item C)



1			H	2			3			4			5			6			
				X	7	2	5												
7				8			9			10			11			12			

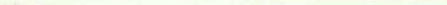
[illegible]

31	32	33	34	35	36
37	38	39	40	41	42
43	44	45	46	47	48

[illegible]

☐ 4. Toxic  
(D000)

## XI. Certification

Signature 	Name and Official Title (type or print) ROBERT M. PAULUS - PARTNER OWNER	Date Signed 7/21/86
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as to #1 through #5

**THE**  
**PAULUS**  
**AGENCY**

REAL ESTATE AND APPRAISALS  
663 GEORGES ROAD  
P. O. BOX 1837  
NORTH BRUNSWICK, NEW JERSEY 08902  
(201) 545-2400

July 22, 1986

EPA Region #2  
Permits Administration Branch Room 432  
26 Federal Plaza  
New York, N.Y. 10278

Attn: Mr. Al Minervini

Re: Application for Permit Number  
187 New Street  
New Brunswick, N.J.

Dear Mr. Minervini:

As per our discussion today, enclosed is the revised form you requested regarding the application for the above property.

sincerely,



Robert M. Paulus

